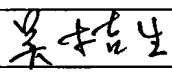
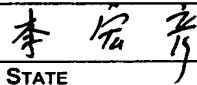


UNITED STATES OF AMERICA			DOCKET No.
COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION			05503-PCT
<p>As a below named inventor, I hereby declare that my residence, mailing address and citizenship are as stated below next to my name and that I verily believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <p>EVACUATED GLASS PANEL AND METHOD OF FIXING SUPPORT MEANS, DISPOSED THEREIN, the specification of which is attached hereto, unless the following box is checked:</p> <p><input type="checkbox"/> was filed on <u>17 April 2003</u> as United States Application Number or PCT International Application Number <u>PCT/CN2003/000277</u> and was amended on _____ (if applicable).</p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p> <p>I hereby claim priority benefits under Title 35, United States Code, Section 119 or 365(b) of any foreign application(s) for patent, inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, or United States provisional application(s) listed below and have also identified below any application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.</p> <p>Prior Foreign Application or Provisional Application(s)</p>			
COUNTRY	APPLICATION NUMBER	DATE OF FILING (MM/DD/YYYY)	PRIORITY CLAIMED
CHINA	CN 02129576.X	09/05/2002	YES <input checked="" type="checkbox"/> No <input type="checkbox"/>
			YES <input type="checkbox"/> No <input type="checkbox"/>
			YES <input type="checkbox"/> No <input type="checkbox"/>
<p>I hereby appoint Jason Z. Lin, Registration No. 37,492, whose address is listed below, as my principal agent with full power of substitution and revocation to prosecute this application, to transact all business in the Patent and Trademark Office connected therewith and to receive all correspondence.</p> <p>SEND CORRESPONDENCE TO:</p> <p style="text-align: center;">Supreme Patent Services Post Office Box 2339 Saratoga, CA 95070-0339</p> <p style="text-align: right;">Tel (408) 867-9757 Fax (408) 867-7437</p> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
GIVEN NAME (FIRST AND MIDDLE) OF SOLE OR FIRST INVENTOR		FAMILY NAME OR SURNAME	
Jusheng		WU	
INVENTOR'S SIGNATURE		DATE	
		March 2, 2005	
RESIDENCE: CITY	STATE	COUNTRY	CITIZENSHIP
Beijing CNX		CHINA	CHINA
MAILING ADDRESS			
No.10 Jiuxianqiao Road, Chaoyang District, Beijing 100016 China			
GIVEN NAME (FIRST AND MIDDLE) OF SECOND JOINT INVENTOR (if any)		FAMILY NAME OR SURNAME	
Hongyan		LI	
INVENTOR'S SIGNATURE		DATE	
		March 2, 2005	
RESIDENCE: CITY	STATE	COUNTRY	CITIZENSHIP
Beijing CNX		CHINA	CHINA
MAILING ADDRESS			
No.10 Jiuxianqiao Road, Chaoyang District, Beijing 100016 China			
GIVEN NAME (FIRST AND MIDDLE) OF THIRD JOINT INVENTOR (if any)		FAMILY NAME OR SURNAME	
INVENTOR'S SIGNATURE		DATE	
RESIDENCE: CITY	STATE	COUNTRY	CITIZENSHIP
MAILING ADDRESS			